

# SAINT CHRISTOPHER AND NEVIS INLAND REVENUE DEPARTMENT

OBJ-002

## NOTICE OF OBJECTION TO REAL PROPERTY ASSESSMENT



*Note: Where applicable, enter complete names, addresses, and assessment information. Failure to complete all applicable sections can cause delays in the processing of your objection.*

### SECTION 1 - TAXPAYER IDENTIFICATION

TAXPAYER NO.:  SOCIAL SECURITY NO.:

LAST NAME:  FIRST NAME:

MIDDLE NAMES:

OR

COMPANY NAME:

MAILING ADDRESS:

CITY / TOWN / VILLAGE:  STATE:

COUNTRY:  CODE:

HOME PHONE:  WORK :  MOBILE :

E-MAIL ADDRESS:

NATIONALITY:

### SECTION 2 - PROPERTY DETAILS

LOT NO.:  LAND SIZE:

PROPERTY ID:  REGISTER/ VOL.:  FOLIO:

VALUATION AREA:

PROPERTY ADDRESS:

CITY / TOWN / VILLAGE:

ISLAND:  ST . CHRISTOPHER  NEVIS

### SECTION 3 - ASSESSMENT DETAILS

ASSESSMENT NO.:

ASSESSED VALUE:  ,  ,  .

ASSESSMENT DATE:  /  /

DAY / MONTH / YEAR

**SECTION 4 - REASONS FOR OBJECTION**

<input type="checkbox"/>	DESCRIPTION OF PROPERTY	<input type="checkbox"/>	ALL OF THE PROPERTY IS EXEMPT	<input type="checkbox"/>	LAND SIZE
<input type="checkbox"/>	NAME AND ADDRESS OF TAXPAYER	<input type="checkbox"/>	PART OF PROPERTY IS EXEMPT	<input type="checkbox"/>	STRUCTURE MEASUREMENTS
<input type="checkbox"/>	DESCRIPTION OF IMPROVEMENT	<input type="checkbox"/>	LAND VALUATION AMOUNT	<input type="checkbox"/>	OTHER
<input type="checkbox"/>	VALUATION CLASS	<input type="checkbox"/>	STRUCTURE VALUATION AMOUNT		

DETAILS:


**SECTION 5 - DECLARATION**

I declare that the information given on this form is to the best of my knowledge and belief true and correct and that I have the authority to disclose the information provided. I understand that the Saint Christopher and Nevis Inland Revenue Department reserves the right to review and adjust or reassess the information provided for a period of up to six years and the vendor and/or purchaser and/or their representatives will be held responsible for (i) understating, overstating or omitting data and (ii) the payment of any fees fines and penalties associated with their actions, as defined under the Tax Administration and Procedures Act and The Perjury Act, which will affect any subsequent tax related assessment. Please be aware that a person who makes a false declaration commits an offence under Section 5 of the Perjury Act, 2005 of the laws of Saint Christopher and Nevis and that person is liable to imprisonment for a term of seven (7) years or to a fine of thirty-thousand (\$ 30,000.00) dollars.

SIGNATORY FULL NAME:

TITLE IF INCORPORATED

SIGNATURE OF PERSON OBJECTING OR REPRESENTATIVE

DAY / MONTH / YEAR

**SECTION 6 - INLAND REVENUE DEPARTMENT USE ONLY**

DOCUMENT NO:

DATE RECEIVED:

DAY / MONTH / YEAR

DATE REVIEWED:

DAY / MONTH / YEAR

REVIEWED BY: